

**Recipient Committee  
Campaign Statement  
Cover Page**

Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp <b>CITY CLERK MORENO VALLEY RECEIVED</b>  <b>15 AUG 18 AM 11:4</b>	<b>CALIFORNIA 460</b> 2001/02 FORM
Page <u>1</u> of <u>9</u>	
For Official Use Only	

Statement covers period from <u>January 1, 2015</u>  through <u>June 30, 2015</u>	Date of election if applicable: (Month, Day, Year)  _____
--------------------------------------------------------------------------------------------	--------------------------------------------------------------------

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><small>(Also Complete Part 5)</small><br><br><input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Ballot Measure Committee<br><input type="checkbox"/> Primarily Formed<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><small>(Also Complete Part 6)</small><br><br><input type="checkbox"/> Primarily Formed Candidate/<br>Officeholder Committee<br><small>(Also Complete Part 7)</small> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**2. Type of Statement:**

- |                                                                                                         |                                                                               |
|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Preelection Statement                                                          | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                               | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement                                                          | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input checked="" type="checkbox"/> Amendment (Explain below)<br><u>provided additional information</u> |                                                                               |

**3. Committee Information**

I.D. NUMBER  
**1359613**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
**Friends to Elect George Price for Moreno Valley City Council 2014**

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Moreno Valley</b>	<b>CA</b>	<b>92555</b>	[REDACTED]

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
**N/A**

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
**Marsha S Locke**

MAILING ADDRESS  
[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Moreno Valley</b>	<b>CA</b>	<b>92555</b>	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7-20-2015  
Date

Executed on 8-18-2015  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By [REDACTED] Treasurer or Assistant Treasurer

By [REDACTED] Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

Type or print in ink.

**i. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

George Price

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Moreno Valley City Council District 3

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Moreno Valley CA 92555

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME

N/A

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

YES  NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

YES  NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

**6. Ballot Measure Committee**

NAME OF BALLOT MEASURE

N/A

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT  
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

**7. Primarily Formed Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

George Price

City Council

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period  
from January 1, 2015  
through June 30, 2015

CALIFORNIA FORM **460**

Page 3 of 9

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

I.D. NUMBER  
1359613

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
i. Monetary Contributions ..... Schedule A, Line 3	\$ <u>4,948</u>	\$ <u>4,948</u>
ii. Loans Received ..... Schedule B, Line 3	<u>0</u>	<u>0</u>
iii. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>4,948</u>	\$ <u>4,948</u>
iv. Nonmonetary Contributions ..... Schedule C, Line 3	<u>0</u>	<u>0</u>
v. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>4,948</u>	\$ <u>4,948</u>

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
i. Payments Made ..... Schedule E, Line 4	\$ <u>2,646.55</u>	\$ <u>2,646.55</u>
ii. Loans Made ..... Schedule H, Line 3	<u>0</u>	<u>0</u>
iii. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>2,646.55</u>	\$ <u>2,646.55</u>
iv. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>0</u>	<u>0</u>
v. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>0</u>	<u>0</u>
vi. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>2,646.55</u>	\$ <u>2,646.55</u>

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

2. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>2,770.55</u>
3. Cash Receipts ..... Column A, Line 3 above	<u>4,948</u>
4. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>0</u>
5. Cash Payments ..... Column A, Line 8 above	<u>2,646.55</u>
6. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>5,072</u>

If this is a termination statement, Line 16 must be zero.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

7. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 \$ 0

## Cash Equivalents and Outstanding Debts

8. Cash Equivalents ..... See instructions on reverse	\$ <u>0</u>
9. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>2,500</u>

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

**Schedule A  
Monetary Contributions Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE

Statement covers period from <u>January 1, 2015</u> through <u>June 30, 2015</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>9</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

I.D. NUMBER

1359613

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03-28-2015	Marion Ashley [REDACTED] [REDACTED] Riverside, 92501	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Riverside County Supervisor	500	500	
03-28-2015	Larry Froehlich [REDACTED] Moreno Valley CA. 92555	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Retired	100	100	
03-28-2015	William Lynch [REDACTED] Rancho Santa Fe, CA 92067	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	President of the William Lynch Company	1000	1000	
03-28-2015	Al Rattan 25467 MEDICAL CENTER DR, STE 20 MURRIETA, CA 92562-5963	<input type="radio"/> IND <input checked="" type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Continental East Development	400	400	
03-28-2015	Frontier Homes 9620 Center Ave Rancho Cucamonga, CA 91730	<input type="radio"/> IND <input checked="" type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Frontier Homes	500	500	

**SUBTOTAL \$ 2,500**

**Schedule A Summary**

Amount received this period – contributions of \$100 or more. (Include all Schedule A subtotals.) .....	\$	<u>4,948</u>
Amount received this period – unitemized contributions of less than \$100 .....	\$	<u>0</u>
Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$</b>	<u>4,948</u>

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other  
PTY – Political Party  
SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CON

Statement covers period  
from January 1, 2015  
through June 30, 2015

**CALIFORNIA FORM 460**  
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NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

I.D. NUMBER

1359613

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03 - 29 - 2015	Sue Johnson [REDACTED] Riverside, CA 92507-8715	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Retired	500	500	
03 - 29 - 2015	Ron Loveridge [REDACTED] Riverside, CA 92521	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	UC Riverside Administrator	100	100	
03 - 29 - 2015	Southern California Gas Company 7000 Indian Ave Ste 105 Riverside, CA 92506	<input type="radio"/> IND <input checked="" type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Southern California Gas Company	198	198	
03 - 29 - 2015	Joseph Rivani [REDACTED] Los Angeles, California 90010	<input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	President of Global Investments and Development	1000	1000	
06 - 1 - 2015	Builders Industry Association 24 Executive Park, Suite 100 Irvine, CA 92614	<input type="radio"/> IND <input checked="" type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	BIA	150	150	
<b>SUBTOTAL \$</b>				<b>1948</b>		

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>January 1, 2015</u> through <u>June 30, 2015</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>6</u> of <u>9</u>
I.D. NUMBER	

NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/1/2015	Paul Reim [REDACTED] Newport Beach CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	500	500	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>500</b>		

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule B – Part 1  
Loans Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from January 1, 2015  
through June 30, 2015

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

I.D. NUMBER

1359613

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
George Price [REDACTED] Moreno Valley, CA 92555 <input checked="" type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC	Retired	\$ 2500	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ 2500 DATE DUE	_____% RATE	\$ 3,500 11/14/13 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** 3,500 \$
<input type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	_____% RATE	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<input type="radio"/> IND <input type="radio"/> COM <input type="radio"/> OTH <input type="radio"/> PTY <input type="radio"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	_____% RATE	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<b>SUBTOTALS \$</b>								<b>\$ 2,500 \$</b>

**Schedule B Summary**

(Enter (e) on  
Schedule E, Line 3)

1. Loans received this period ..... \$ 0  
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period ..... \$ 0  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$** 0  
(May be a negative number)

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

† Contributor Codes

IND – Individual    COM – Recipient Committee (other than PTY or SCC)    OTH – Other    PTY – Political Party    SCC – Small Contributor Committee

**Schedule E  
Payments Made**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE

Statement covers period from <u>January 1, 2015</u> through <u>June 30, 2015</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1359613	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
NS campaign consultants	MTG meetings and appearances	RFD returned contributions
TB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
VC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
L candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
ND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
D independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
EG legal defense	PRO professional services (legal, accounting)	VOT voter registration
IT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pizza Factory 25970 Iris Ave Ste B1 Moreno Valley, CA 92555	TRC	Meal for campaign team	40
Wix.com, Inc.	WEB	campaign website fees	163.85
Rene's Bar & Grill 25024 Filaree Ave, Moreno Valley, CA 92551	FND	catered food for fundraiser	442.70

Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 646.55**

**Schedule E Summary**

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 2600.55
2. Unitemized payments made this period of under \$100	\$ 40
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 2,646.55</b>

**Schedule E  
Continuation Sheet)  
Payments Made**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>January 1, 2015</u> through <u>June 30, 2015</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Friends to Elect George Price for Moreno Valley City Council 2014

I.D. NUMBER  
1359613

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |                                                                  |                                               |                                                               |
|------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants                                          | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations                                               | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| ND fundraising events                                            | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| ID independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| EG legal defense                                                 | PRO professional services (legal, accounting) | VOT voter registration                                        |
| IT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vox Consulting 12625 Frederick Street Suite I-5 Box 283	CNS	Consulting, fundraising and website	2,000

Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 2,000**